

State of North Carolina
Department Of Environment, Health, And Natural Resources
Division Of Environmental Management
Non-Discharge Permit Application
(THIS FORM MAY BE PHOTOCOPIED FOR USE AS AN ORIGINAL)

GRAVITY SEWER EXTENSION

I. GENERAL INFORMATION:

1. Applicant (corporation, individual, or other): _____
2. Print Owners or Signing Official's Name and Title (the person who is legally responsible for the facility and its compliance): _____
3. Mailing Address: _____
City: _____ State: _____ Zip: _____
Telephone No.: (_____) _____
4. Project Name (subdivision, facility, or establishment name - should be consistent with project name on plans/specs., letters of flow acceptance, operational agreements, etc.): _____
5. Application Date: _____ 6. Fee Submitted: \$ _____
7. County where project is located: _____

II. PERMIT INFORMATION:

1. Permit No. (will be completed by COG): _____
2. Specify whether project is: _____ new; _____ renewal; _____ modification.
If renewal, complete only sections I through III and applicant signature. Engineer signature not required for renewal.
3. If this application is being submitted as a result of a renewal or modification to an existing permit, list the existing permit no. _____ and issue date: _____
4. Specify whether the applicant is _____ public or _____ private.

III. INFORMATION OF WASTEWATER:

1. Nature of Wastewater: _____ %, Domestic: _____ %, Commercial: _____ %, Industrial: _____ %, Other waste (specify): _____
2. Please provide a one or two word description specifying the origin of the wastewater, such as school, subdivision, hospital, commercial, industrial, apartments, etc.: _____

3. Indicate any parameter(s) (and its concentration) that will be greater than normal domestic levels: _____
4. If wastewater is **not** domestic in nature, what level of pretreatment has been provided to ensure protection of the receiving wastewater treatment facility? _____
5. If a pretreatment permit is required, had one been issued? _____ Yes _____ No
If Yes, please attach a copy of the pretreatment permit. If No, when will one be issued? _____
6. Volume of wastewater generated by this project: _____ gallons per day.
7. Explanation of how wastewater volume was determined: _____

IV. DESIGN INFORMATION:

1. Brief project description: _____
2. Name of wastewater treatment facility receiving wastewater: _____
- a) Facility permit no: NC _____
- b) Engineer should provide statement of his evaluation of downstream sewers to accept the wastewater: _____
3. Summary of sewer pipe by diameter size and pipe material. Indicate here whether C factor or N factor is used (*circle C or N below*): _____

Diameter (Inches)	Length (L. F.)	Pipe Material	C or N Factor	Minimum Slope	Maximum Slope %	Minimum. Velocity (fps)	Maximum Velocity (fps)	Minimum Cover (Inch.)

NOTE: *The minimum velocity must not be less than 2 fps. For public sewers the minimum diameter is 8 inches.*

4. Anchors shall be provided for sewers with slopes greater than 20%. The anchor spacing shall be as follows:
 - a) 36 feet separation for slopes of 21% to 35%
 - b) 24 feet separation for slopes of 36% to 50%
 - c) 16 feet separation for slopes of 50% and greater

For velocities greater than 15 fps, it is strongly recommended that measures be considered which will protect the sewers and manholes from erosion. For velocities greater than 20 fps, erosion control measures must be specified.

For any excessive slopes or velocities that will occur in any sewer line segment, what measures have been taken to protect the sewer pipe and manholes?

5. Maximum sewer reach length between manholes: _____ linear feet.
6. This sewer line segment occurs between manhole no. _____ and manhole no. _____
7. Does the owner/operator have the ability to clean this length? _____ Yes _____ No
8. Sewer subject to existing or planned traffic bearing loads? _____ Yes _____ No
If yes, what measures are being taken to enable the sewers to withstand the loads?

9. Outside drop manholes are provided where invert separations exceed: _____ ft.
10. Identify (by manhole number) those manholes that have drop connections:

11. Max. allowable infiltration/exfiltration test rate: _____ GPD/pipe dia. in./mi.

Note: *Must not exceed 100 GPD/pipe dia. in./mile*

12. Minimum separation distances as shown on the plans or addressed in the specifications:
 - a) 100 ft. horizontal separation from wells or other water supplies? _____ Yes _____ No
 - b) 12 in. vertical separation from storm sewer or ferrous pipe sanitary sewer specified? _____ Yes _____ No
 - c) 10 ft. horizontal separation from water mains or 18 in. vertical separation (water over sewer) or ferrous pipe specified? _____ Yes _____ No
13. Are manholes subject to flooding? _____ Yes _____ No
14. If yes, are manhole rim elevations 1 foot above 100 year flood level, (100 year flood elevation should be indicated on plans)? _____ Yes _____ No

15. Or are manholes watertight and vented 1 foot above the 100 _____ Yes _____ No
year flood elevation (should be shown on plans)?
16. Identify (by manhole number) those manholes that are vented: _____
17. Does this project involve any stream crossings? _____ Yes _____ No
*If yes, what precautions or special features have been utilized to ensure protection of
the sewer line and not restrict stream flow? Identify the sheet of the plans and station
number where stream crossings are located:*
- _____

Name and Complete Address of Engineering firm: _____

City: _____ State: _____ Zip: _____
Telephone No: _____

Professional Engineer's Certification:

I, _____, attest that this application for:

_____ has been reviewed by me and is accurate and complete to the best of my knowledge. I further attest that to the best of knowledge the proposed design has been prepared in accordance with the applicable regulations. Although certain portions of this submittal package may have been developed by other professionals, inclusion of these materials under my signature and seal signifies that I have reviewed this material and have judged it to be consistent with the proposed design.

North Carolina Professional Engineer's Registration No. _____
Print Name of Engineer _____

Seal and Signature (specify date):

Applicant's Certification:

I, _____, attest that this application for: _____

has been reviewed by me and is accurate and complete to the best of my knowledge. I understand that if all required parts of this application are not completed and that if all required supporting information and attachments are not included, this application package will be returned as incomplete.

Signature _____ Date _____

NOTE: *The completed application package, including all supporting information and materials, will be sent to the following address by the City of Greensboro:*

**NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT
WATER QUALITY SECTION
PERMITS AND ENGINEERING UNIT
POST OFFICE BOX 29535
NORTH SALISBURY STREET
RALEIGH, NORTH CAROLINA 27626-0535

TELEPHONE NUMBER: (919)733-5083**



DELEGATED MUNICIPALITY GRAVITY SEWER CERTIFICATION
(THIS FORM MAY BE PHOTOCOPIED FOR USE AS AN ORIGINAL)

Applicant: _____

Project Name: _____

Delegated Municipality Reviewer's Certification:

I, _____, attest that the subject plans and specifications have been reviewed under my supervision and that those plans and specifications are consistent with the information that has been specified on the Non-Discharge Application and the Division of Environmental Management's minimum design requirements for gravity sewer projects.

Delegated Municipality Reviewer's NC Professional Engineer's Registration No.: _____

Seal and Signature (specify date):